

07/09/08

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

28

Application Number

08/675,969

Filing Date

July 5, 1996

First Named Inventor

Claudio Boffito

Art Unit

3744

Examiner Name

William C. Doerrier

Attorney Docket Number

SAESP050.US01

ENCLOSURES (Check all that apply)
 Fee Transmittal Form Drawing(s) After Allowance Communication to TC Fee Attached Licensing-related Papers Appeal Communication to Board of Appeals and Interferences Amendment/Reply Petition Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) After Final Petition to Convert to a Provisional Application Proprietary Information Affidavits/declaration(s) Power of Attorney, Revocation Status Letter Extension of Time Request Change of Correspondence Address Other Enclosure(s) (please identify below): Express Abandonment Request Terminal Disclaimer 1.) Petition for Extension of Time Information Disclosure Statement Request for Refund 2.) Updated Power of Attorney Certified Copy of Priority Document(s) CD, Number of CD(s) _____ 3.) Certificate of Mailing under 37 CFR 1.8 Reply to Missing Parts/ Incomplete Application Landscape Table on CD 4.) Postcard Reply to Missing Parts under 37 CFR 1.52 or 1.53
Remarks

The Commissioner is authorized to credit/debit Deposit Account No. 50-3539 if deemed necessary for this submission.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT
Firm Name
TIPS GroupSignature
Printed name
Brian S. BoyerDate
July 7, 2008 Reg. No. 52,643
CERTIFICATE OF TRANSMISSION/MAILING

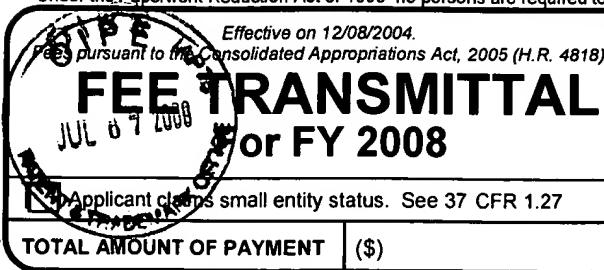
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Typed or printed name
Ana MolinaDate
7/7/08

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 <p>Effective on 12/08/2004. Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p>FEE TRANSMITTAL JUL 07 2008 for FY 2008</p> <p>Applicant claims small entity status. See 37 CFR 1.27</p>		Complete If Known <table border="1"> <tr> <td>Application Number</td> <td>08/675,969</td> </tr> <tr> <td>Filing Date</td> <td>July 5, 1996</td> </tr> <tr> <td>First Named Inventor</td> <td>Claudio Boffito</td> </tr> <tr> <td>Examiner Name</td> <td>William C. Doerrier</td> </tr> <tr> <td>Art Unit</td> <td>3744</td> </tr> <tr> <td>Attorney Docket No.</td> <td>SAESP050.US01</td> </tr> </table>		Application Number	08/675,969	Filing Date	July 5, 1996	First Named Inventor	Claudio Boffito	Examiner Name	William C. Doerrier	Art Unit	3744	Attorney Docket No.	SAESP050.US01
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Attorney Docket No.	SAESP050.US01														
TOTAL AMOUNT OF PAYMENT (\$)															

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 50-3539 Deposit Account Name: TIPS Group

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

<u>Small Entity</u>	<u>Fee (\$)</u>
50	25
210	105
370	185

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
- 20 or HP =	x	=		<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>
- 3 or HP =	x	=		

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

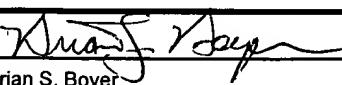
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for Ext. of Time-1 mos \$120.00 \$120.00

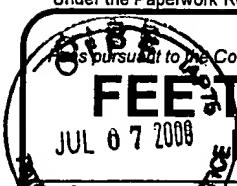
SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 52,643	Telephone 650-293-3365
Name (Print/Type)	Brian S. Boyer		Date July 7, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<input checked="" type="checkbox"/> Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number	08/675,969
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	July 5, 1996
<input checked="" type="checkbox"/> TIPS		First Named Inventor	Claudio Boffito
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Fee (\$)Fee Paid (\$)

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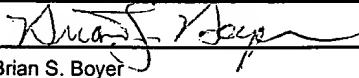
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